Outcomes of the Education-Centered Medical Home Video Transcript

**Describer:** Screen fades to Dr. Daniel Evans, a physician in the department of Internal Medicine and Geriatrics at Northwestern University.

**Dr. Evans:** So I’m the director for a student program at Northwestern called “the Education Centered Medical Home” or “ECMH” for short. It’s a program we started about four and half years ago as a way to get more students involved in primary care early on in their training….the idea being they start working in the clinic as a first year medical student and they stay there for all four years. We’ve been thrilled to get this grant as a way to build up the program and study it more academically and find out more ways where we can make it better and potentially expand it.

**Dr. Evans:** I think our program is exciting and essential because about four years ago when we set out, we realized that one of the most important things that we needed to change about our medical student curriculum is the fact that they never saw the same patient back for a follow-up visit. As a primary care doctor, I feel it’s critical if you’re going to improve health outcomes, if you’re going to improve health care disparities, if you’re going to improve social determinants of health… there’s no way to really understand those things without continuity. We think that our program is exciting, we’re trying to build a sustainable model where students can experience continuity of care and really understand the deep-dive impact of social of health in their patients over time.

**Dr. Evans:** Social determinants of health are so important and ubiquitous in health care, but without experiencing it and seeing it in real life how unique patients are effected by economics, by transportation issues, insurance issues, barriers on the phone, barriers in communication… when you have your own patient and you see how they struggle and you coach them and you see them continue to struggle it really does reinforce that this is challenging and that we need to address multiple things. It’s just not as easy as telling the patient what to do. I think we’ve created an environment where students… they get this, they all graduate the program having seen several patients back long enough to see how difficult it is. And I think we’re creating opportunities where they really take ownership and they feel proud of themselves. They’re part of the health care team. And I think if they graduate – at least having had one patient they can remember that they got better, that they coached and kind of address some of these barriers to care – I think it’s going to change the way they train as a resident, I think it’s going to change potentially the career paths they choose… I think it will be very impactful.

**Describer:** screen fades to white, followed by the Northwestern University logo.